

**U.S. Department of Education**

**Staff Report  
to the  
Senior Department Official  
on  
Recognition Compliance Issues**

<b>RECOMMENDATION PAGE</b>
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1. **Agency:** American Psychological Association (1970/2005)  
(The dates provided are the date of initial listing as a recognized agency and the date of the agency's last grant of recognition.)
2. **Action Item:** Compliance Report
3. **Current Scope of Recognition:** The accreditation in the United States of doctoral programs in clinical, counseling, school and combined professional-scientific psychology; predoctoral internship programs in professional psychology; and postdoctoral residency programs in professional psychology.
4. **Requested Scope of Recognition:** Same as above.
5. **Date of Advisory Committee Meeting:** June, 2013
6. **Staff Recommendation:** Renew the agency's recognition for a period of three years.
7. **Issues or Problems:**

## **EXECUTIVE SUMMARY**

### **PART I: GENERAL INFORMATION ABOUT THE AGENCY**

The American Psychological Association (APA), Commission on Accreditation (COA or the agency) is a programmatic accreditor. It currently accredits over 900 professional education and training programs at the doctoral and postdoctoral level in psychology. The agency has identified multiple federal programs that require the Secretary's recognition of its accredited programs as a prerequisite for programs to participate in non-Title IV federal programs and/or federal employment. These include, for example--

- The Graduate Psychology Education (GPE) Program administered by the United States Department of Health and Human Services (DHHS),
- The Federal Center for Medicare/Medicaid Services (CMS) program for postdoctoral residency programs in medical settings, and
- The Predoctoral Fellowship offered by the Mental Health and Substance Abuse Services Administration (SAMSHA).

In addition, the Department of Veterans Affairs and the Federal prison system cite the APA's COA accreditation as the standard both for admission to its internship training programs in professional psychology and for employment as a psychologist at all VA medical centers (VAMCs).

### **Recognition History**

The American Psychological Association (APA), Commission on Accreditation (COA or the agency) received initial recognition by the Secretary in 1970, and has received continued recognition since that time. The agency was last reviewed for renewal of recognition at the spring 2011 meeting of the National Advisory Committee on Institutional Quality and Integrity (NACIQI or the Committee). Both Department staff and NACIQI recommended to the senior Department official to continue the agency's recognition and require it to come into compliance within 12 months, and submit a compliance report that demonstrates the agency's compliance with the issues identified in the staff report. The senior Department official, Assistant Secretary Eduardo Ochoa, concurred with the recommendations and this compliance report is in response to that requirement.

## **PART II: SUMMARY OF FINDINGS**

### **§602.15 Administrative and fiscal responsibilities**

**The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition.**

**The agency meets this requirement if the agency demonstrates that--**

**(a) The agency has--**

**(1) Adequate administrative staff and financial resources to carry out its accrediting responsibilities;**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the agency operated with a negative balance for four consecutive years, and although it increased fees for two of those years, it operated with a negative cash flow based on the information and documentation provided. The agency stated that it was supported by the American Psychological Association (APA) and its Accreditation Fee Stabilization Fund. However, the agency did not provide documentation to support its assertions regarding its financial viability nor otherwise provide additional information or clarification of the agency's current and projected financial viability.

Discussion: In response to the Department's finding, the agency provided additional information and documentation to demonstrate that it has the financial resources to carry out its accrediting responsibilities. Specifically, the agency explained its accreditation fee structure and noted recent changes to minimize future budget deficits and to support infrastructure improvements. The agency also provided documentation of assurance of continued financial support by the APA for accreditation functions.

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### **(5) Representatives of the public on all decision-making bodies; and**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the agency did not demonstrate that it has an effective mechanism to ensure that its public members selected to serve on its Commission and appeals panel meet the requirements as stated in the regulatory definition, with specific regard to the requirement that a public member cannot be a spouse, parent, child, or sibling of someone identified in component (1) or (2) of the Secretary's definition of a representative of the public.

Discussion: In response to the Department's finding, the agency provided information and documentation to demonstrate that it has an effective mechanism to ensure that its decision-making bodies include public

representatives. Specifically, the agency described its process to vet its public representatives to ensure that they meet the requirements of the regulatory definition. The agency provided a blank annual attestation document for its public representatives. However, as the document is not completed, it does not demonstrate that the current public representatives completed the vetting process and meet the regulatory definition.

#### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided documentation of implementation of its vetting process which demonstrates that current public representatives meet the regulatory definition. Specifically, the agency provided completed annual attestation forms for the current public representatives.

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#### **(b) The agency maintains complete and accurate records of--**

**(1) Its last full accreditation or preaccreditation reviews of each institution or program, including on-site evaluation team reports, the institution's or program's responses to on-site reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution's or program's most recent self-study; and**

**2) All decisions made throughout an institution's or program's affiliation with the agency regarding the accreditation and preaccreditation of any institution or program and substantive changes, including all correspondence that is significantly related to those decisions.**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the agency's recordkeeping policy was not clear to ensure that the agency maintains records of all decisions, (including substantive change) and all correspondence related to those decisions throughout the program's affiliation with the agency. The agency provided its proposed recordkeeping policy amendments to meet the regulatory requirements and to include the agency's actual practices regarding records retention. However, the agency did not provide documentation of the adoption and implementation of its proposed recordkeeping policy.

Discussion: In response to the Department's finding, the agency provided documentation that the proposed recordkeeping amendments were adopted and implemented in July 2011.

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**§602.19 Monitoring and reevaluation of accredited institutions and programs.**

**(b) The agency must demonstrate it has, and effectively applies, a set of monitoring and evaluation approaches that enables the agency to identify problems with an institution's or program's continued compliance with agency standards and that takes into account institutional or program strengths and stability. These approaches must include periodic reports, and collection and analysis of key data and indicators, identified by the agency, including, but not limited to, fiscal information and measures of student achievement, consistent with the provisions of §602.16(f). This provision does not require institutions or programs to provide annual reports on each specific accreditation criterion.**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the agency did not provide evidence that it requires programs, as part of its monitoring activities, to submit key indicators regarding the continued fiscal viability of its programs as required by this criterion. The agency stated that it does not collect direct financial information on a program, even though several sections of the agency's Guidelines and Principles specifically require that programs and site teams assess the adequacy of a sponsoring institution's budget to support the psychological programs. Therefore, despite the agency's reported limitations of access to a sponsoring institution's budget, the Department expects the agency to develop monitoring processes and procedures to ensure that the program has the financial capacity for the duration of the accreditation period.

Discussion: In response to the Department's finding, the agency provided information and documentation regarding its financial capacity monitoring processes and procedures. The agency has revised its annual report to include specific inquiry regarding any changes to the financial support provided to programs. The submitted annual reports are reviewed by the Commission. The agency provided blank copies of the revised annual report. However, as the request for financial viability information on the annual report is new, the agency has not provided documentation of implementation of the review process. In its narrative, the agency explained that such a review was scheduled to take place in October 2012, after the date for submission of its compliance report and it should, therefore, be able to provide the documentation in its response to this draft analysis.

**Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided evidence regarding its analysis of financial capacity information on the annual report, and any action taken as a result of the review. Specifically, the agency provided documentation of the review of eight programs and 10 internships that experienced a financial change in the previous year. The agency also provided documentation on the

request for additional information from and monitoring of institutions that the agency determined required additional review concerning financial capacity based on the information submitted on the annual report.

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#### **§602.20 Enforcement of standards**

**(a) If the agency's review of an institution or program under any standard indicates that the institution or program is not in compliance with that standard, the agency must--**

**(1) Immediately initiate adverse action against the institution or program; or**

**(2) Require the institution or program to take appropriate action to bring itself into compliance with the agency's standards within a time period that must not exceed--**

**(i) Twelve months, if the program, or the longest program offered by the institution, is less than one year in length;**

**(ii) Eighteen months, if the program, or the longest program offered by the institution, is at least one year, but less than two years, in length; or**

**(iii) Two years, if the program, or the longest program offered by the institution, is at least two years in length.**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the agency's enforcement policies and procedures do not ensure that a program that fails to comply with the agency's standards will not allow a program to exceed the maximum timeframes required by this section. Department staff found that the agency must revise its policies and procedures to ensure that its decisions will not allow noncompliant programs to exceed the maximum enforcement timeframes, and demonstrate that it has implemented timely enforcement actions based on those revisions.

Discussion: In response to the Department's finding, the agency provided its revised enforcement procedures which meet the requirements of this section. Specifically, the agency has clarified that it will only use a "deferral for information" action when it is requesting more information from a program in order to make a decision regarding compliance, but not once the agency has determined that the program is noncompliant with the agency's standards. Once a program is found to be out-of-compliance with standards, the agency will use a "deferral for cause" (or other adverse) action which is subject to the timeframes required by this section.

The agency provided documentation of implementation of the new enforcement procedures in the form of a decision letter. The decision letter includes a "deferral for cause" action and demonstrates notice to the program of the enforcement timeframes required by this section. However, the example

decision letter is not evidence that the agency took an adverse action when a program did not bring itself into compliance, nor that the agency has enforced its timeframes.

### **Analyst Remarks to Response:**

In response to the draft staff analysis, the agency provided further information and documentation of the implementation of its revised enforcement procedures. The agency also provided examples of programs with noted deficiencies that have been given a limited time period to return to compliance under the revised enforcement procedures. As the revised procedures allow for two years to return to compliance, the agency has not encountered a situation to initiate an adverse action when a program failed to bring themselves back into compliance. The agency provided documentation of adverse actions initiated under the previous enforcement procedures.

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**(b) If the institution or program does not bring itself into compliance within the specified period, the agency must take immediate adverse action unless the agency, for good cause, extends the period for achieving compliance.**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the agency's enforcement policy did not clearly include guidance concerning the usage of a good cause extension. The agency stated that it would revise its good cause extension policy concerning enforcement timeframes and actions.

Discussion: In response to the Department's finding, the agency provided its revised operating procedures to include its policy related to good cause extensions. The agency's policy includes guidance regarding the basis for granting a good cause extension and the maximum length of such an extension.

The agency also indicated that it has not had an opportunity to enforce this new procedure, and therefore could not provide documentation to verify implementation of it.

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### **§602.23 Operating procedures all agencies must have.**

**(a) The agency must maintain and make available to the public written materials describing--**

**(1) Each type of accreditation and preaccreditation it grants;**

**(2) The procedures that institutions or programs must follow in**

**applying for accreditation or preaccreditation;**

**(3) The standards and procedures it uses to determine whether to grant, reaffirm, reinstate, restrict, deny, revoke, terminate, or take any other action related to each type of accreditation and preaccreditation that the agency grants;**

**(4) The institutions and programs that the agency currently accredits or preaccredits and, for each institution and program, the year the agency will next review or reconsider it for accreditation or preaccreditation; and**

**(5) The names, academic and professional qualifications, and relevant employment and organizational affiliations of--**

**(i) The members of the agency's policy and decision-making bodies; and**

**(ii) The agency's principal administrative staff.**

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Previous issue: Within the agency's petition for re-recognition reviewed in June 2011, Department staff found that the public information on the agency's website regarding the senior accreditation staff included the name and position, but did not list the organizational affiliation or academic and professional qualifications, and organizational affiliations, as required. The agency stated that it proposed changes to its policies and procedures to include the required information on the website. However, the agency did not provide documentation to demonstrate that the required information regarding senior administrative staff is made available to the public.

Discussion: In response to the Department's finding, the agency provided documentation that it maintains the required information regarding senior administrative staff on its website.

### **PART III: THIRD PARTY COMMENTS**

The Department did not receive any written third-party comments regarding this agency.